

STATE OF HAWAII  
Department of Accounting and General Services  
Division of Public Works

**MONTHLY ESTIMATE**FOR THE MONTH OF January 2009Date: January 9, 2009CONTRACTOR: C C Engineering & Construction, Inc.ADDRESS: P.O. Box 4349Contract No. 56884City, State ZIP: Kaneohe, Hawaii 96744DAGS Job No. 12-33-7263PROJECT TITLE: Leeward Homeless Shelter - UH Building # 36 (Kalaeloa) Site**CONTRACT**Basic Contract Amount \$ 2,030,000.00**CHANGE ORDERS**Total \$ 447,860.00Adjusted Contract Amount \$ 2,477,860.00**WORK ACCOMPLISHED****Basic Contract****Change Order****Total**Completed to Date 100.00% \$ 2,030,000.00 100.00% \$ 447,860.00 \$ 2,477,860.00Retained \$ 101,500.00 \$ 22,393.00 \$ 123,893.00Amount Subject to Payment \$ 1,928,500.00 \$ 425,467.00 \$ 2,353,967.00Payments to Date \$ 1,928,500.00 \$ 420,451.95 \$ 2,348,951.95Payments Now Due \$ - \$ 5,015.05 \$ 5,015.05Payment No. 9

Remarks:

1. Computed and Checked by:

[Signature] 2/3/09  
3. Recommended: Project Inspector or Engineer Date:

[Signature] 2/3/09  
4. Recommended: Area Engineer/Architect Date:

[Signature] FEB 4 2009  
5. Approved: Branch Chief or District Engineer Date:

[Signature] FEB - 4 2009  
State Public Works Administrator Date:

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

C C Engineering &amp; Construction, Inc.

Name of Contractor

[Signature] 1-29-09  
By signature / Title: President Date:

COPY

RECEIVED DAGS  
JAN 29 P 1:42

## CONTRACTOR RETAINAGE Calculation

STATE OF HAWAII  
Department of Accounting and General Services  
Division of Public Works

For the Month of: January 2009

**CONTRACTOR:** C C Engineering & Construction, Inc.  
**PROJECT TITLE:** Leeward Homeless Shelter - UH Building # 36 (Kalaeloa) Site

Contract No.: 56884  
DAGS Job No.: 12-33-7263

[illegible]

## NOTE

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

I certify that the above retentions are correct for this request.

C C Engineering & Construction, Inc.

Name of Contractor

By Signature

Date \_\_\_\_\_

Checked / Verified by:

Initial - Project Inspector or Engineer

**STATE OF HAWAII**  
**DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES**  
**DIVISION OF PUBLIC WORKS**  
**Monthly Payment Slip**

**PAYMENT NO.:** 9

**PROJECT TITLE:** LEEWARD HOMELESS SHELTERS - UH BUILDING 36 (KALAELOA) SITE

**BILLING MONTH:** January-09

**DAGS JOB NO.:** 1 2-33-7263

**CONTRACT NO.:** 56884

**CONTRACTOR:** C C ENGINEERING & CONSTRUCTION, INC

**VENDOR CODE:** 20186900

Original Contract Payment		Suffix: 1			
<u>Suffix</u>	<u>Fund Symbol</u>		<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	G07-355M		\$0.00	\$0.00	\$0.00
Totals:					

Change Order Payment		Suffix: 2, 3, 4, 5			
<u>Suffix</u>	<u>Fund Symbol</u>		<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
05	S07-335M		\$ 5,279.00	\$ 263.95	\$ 5,015.05
Totals:			\$5,279.00	\$263.95	\$5,015.05
Grand Total:			\$5,279.00	\$263.95	\$5,015.05

Verified By *y Xu*

DATE *02/05/2009*

(This Section for Administrative Services Office Use Only)

Vendor Code 20186900

Cost Code 3A1

Voucher No.

*02097N28*

Verified By

*PR 2/12/09*